

STATE OF TENNESSEE
DEPARTMENT OF HEALTH
Bureau of Health Licensure and Regulation
Division of Health Related Boards
227 French Landing, Suite 300
Heritage Place
Nashville, TN 37243

PHIL BREDESEN
GOVERNOR

SUSAN R. COOPER, MSN, RN.
COMMISSIONER

Board of Chiropractic Examiners

September 3, 2008

AGREED CITATION

NAME Bryan Ardis DC
LICENSE # 2007

WHEREAS, Respondent is licensed as a chiropractor in the State of Tennessee by the Tennessee Board of Chiropractic Examiners, license number 2007; and

WHEREAS, Respondent has failed to properly maintain or submit sufficient continuing education credits in violation of Tenn. Code Ann. §§ 63-4-112, 63-4-114(1) and Rule 0260-2-.12 of TENN. COMP. R. & REGS; and

WHEREAS, Respondent admits that this violation occurred and does not wish for this matter to be further prosecuted by the State of Tennessee; and

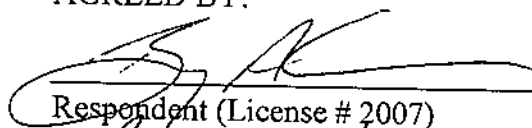
WHEREAS, Respondent acknowledges that Respondent is aware that he or she has a right to a hearing before the Tennessee Board of Chiropractic Examiners. At such hearing, Respondent acknowledges that he or she is aware that he or she may be represented by counsel if he or she so chooses. Moreover, Respondent acknowledges and is fully aware that no civil penalty may be assessed against him or her and no formal action may be taken against his or her license without being provided the opportunity for a hearing before the Tennessee Board of Chiropractic Examiners. Respondent acknowledges and understands that by signing this Agreed Citation and paying a civil penalty of **Six Hundred Dollars (\$600.00)**, and providing proof of completion of the required number of continuing education credits, the Respondent waives his or her right to a hearing as described herein and provided for in the Administrative Procedures Act found at Tenn. Code Ann. § 4-5-301 et seq.; and

WHEREAS, Respondent admits to the failure to obtain 24 hours of required continuing education credits; and

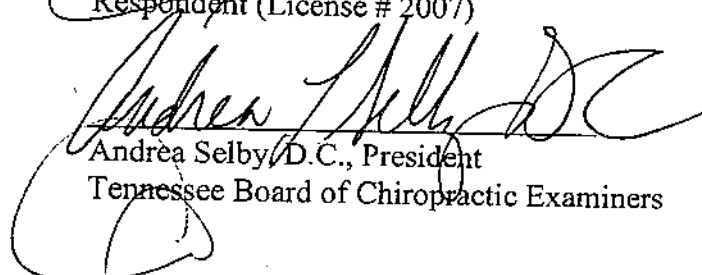
WHEREAS, Respondent acknowledges and understands that if the Respondent does not sign this citation and return it along with a check or money order made out to the State of Tennessee for the prescribed amount within thirty (30) days, then a formal contested case proceedings could be initiated in which the Tennessee Board of Chiropractic Examiners is authorized to assess civil penalties of up to one thousand dollars (\$1,000.00) for each violation of applicable law and the Board could refuse to renew the Respondent's license or the Respondent's license could be suspended or revoked; and

THEREFORE, Respondent voluntarily agrees to sign this citation and submit, within **thirty days (30) days** of ratification of the citation by the Board, a civil penalty in the amount **Six Hundred Dollars (\$600.00)**. The Respondent further agrees to provide proof to the Board of completion of 24 hours of continuing education by the end of the calendar year. Furthermore, Respondent executes this citation for the sole purpose of avoiding further administrative proceedings with respect to this violation. Respondent hereby expressly waives all further procedural steps and expressly waives all rights to seek judicial review of or to challenge or contest the validity of this citation. Respondent acknowledges that this citation is subject to Board approval, agrees that consideration of this citation shall not prejudice the Board in any future proceeding should the Board not approve this citation and acknowledges that this citation, though not reportable to the National Practitioner Databank, is public discipline and will be reported on the respondent's Practitioner Profile pursuant to the Healthcare Consumer Right-to-Know Act contained in T.C.A. § 63-51-101 et seq.

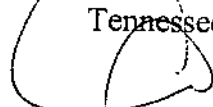
AGREED BY:


Respondent (License # 2007)

10/6/08
Date


Andrea Selby D.C., President
Tennessee Board of Chiropractic Examiners

11/13/08
Date


Andrea Huddleston, Esq., Assistant General Counsel
Tennessee Department of Health

11-17-08
Date